1214712

FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response:16.00							
SEC USE ONLY							
Prefix	1	Serial 					
DATE RECEIVED							
	1	1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
Initial Common Stock Issuance and Series A Offering							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule	506 Section 4(6) ULOF						
Type of Filing: New Filing Amendment	1881 HIR BING 18101 18101 PROFESSION AND AND AND AND AND AND AND AND AND AN						
A. BASIC IDENTIFICAT	ION DATA						
1. Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and in	dicate change.) 03043856						
Avenir Systems, Inc.	330 13030						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
1026 SW Emkay Drive, Bend, OR 97702	541-322-2013						
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offices) SAME							
Brief Description of Business							
Software development							
Type of Business Organization	Coston (planes appoints)						
☑ corporation ☐ limited partnership, already formed	other (please specify):						
business trust limited partnership, to be formed							
Month Year	☐ Estimated DEC 3 0 2003						
• • • •	Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) OR THOMSON FINANCIAL						
CN for Canada; FN for other foreign ju	risdiction) OR SINANCIAL						

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice. Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6/02)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Dennis Harward Business or Residence Address (Number and Street, City, State, Zip Code) 1026 SW Emkay Drive, Bend, OR 97702 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Tom Belivacqua Business or Residence Address (Number and Street, City, State, Zip Code) c/o ArrowPath Venture Capital, 1550 El Camino Real, Suite 100, Menlo Park, CA 94025 Check Box(es) that Apply: □ Director ☐ Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Robert McIntosh Business or Residence Address (Number and Street, City, State, Zip Code) c/o ArrowPath Venture Capital, 1550 El Camino Real, Suite 100, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter ■ Beneficial Owner ☐ Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Benjamin Bisconti Business or Residence Address (Number and Street, City, State, Zip Code) 1026 SW Emkay Drive, Bend, OR 97702 ☐ Director General and/or Check Box(es) that Apply: ☐ Promoter ⊠ Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Harward Investments, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 13501 Ingenuity Drive, Suite 100, Orlando, FL 32826 ☐ General and/or Check Box(es) that Apply: Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) ArrowPath Fund II, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o ArrowPath Venture Capital, 1550 El Camino Real, Suite 100, Menlo Park, CA 94025 ☐ Director General and/or Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В	. INFORM	ATION AB	OUT OFFE	RING					
									:			Yes	No	
1. F	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							×						
Answer also in Appendix, Column 2, if filing under ULOE.														
2. What is the minimum investment that will be accepted from any individual?							\$ <u>N/</u>	<u>A</u>						
								Yes	No					
	3. Does the offering permit joint ownership of a single unit?							×						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be														
listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name														
0	f the t	oroker o	r dealer. If s	more than fiv	ve (5) person	ns to be liste	d are associ	ated persons	of such a bi	roker or dea	ler, you may		•	
S	et fort	h the inf	ormation for	that broker of	or dealer onl	у.			·					
Full N	ame (I	Last nam	ne first, if ind	lividual)		*		•						
											·			
Busine	ss or l	Residenc	e Address		(Numbe	r and Street,	City, State,	Zip Code)						
Name o	of Asso	ociated B	roker or Deal	er										
		-												
States i	n Whi	ch Person	n Listed Has	Solicited or Ir	itends to Soli	icit Purchaser	S							
((Check	"All Stat	es" or check i	ndividual Sta	tes)			•••••				☐ All	All States	
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			e first, if ind											
	<u>.</u>										··			
Busine	ss or I	Residenc	e Address		(Numbe	r and Street,	City, State, 2	Zip Code)						
Name o	of Asso	ciated B	roker or Deal	er		· · · · · · · · · · · · · · · · · · ·								
States is	n Whic	ch Person	Listed Has S	Solicited or In	tends to Soli	cit Purchasers	3							
			es" or check in				•••••		•••••	•••••		☐ All	States	
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			e first, if indi		,									
Rusine	ss or F	Pesidenc	e Address		(Number	and Street,	City State 3	Zin Code)					·	
D doile.	33 01 1	CONCE	c ridaress		(TValifice)	and Ducce,	city, diato, i	onp Code)			• *			
Name o	f Asso	ciated Br	roker or Deale	er										
States in	n Whic	h Person	Listed Has S	Solicited or In	tends to Soli	cit Purchasers								
(C	heck "	'All State	es" or check it	ndividual Stat	es)		***************************************	***************************************	************	***************************************		☐ All	States	
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r Ri	J (SC 1	1 SD 1	I TN 1	f XX 1	I UT 1	[VT]	1 VA 1	[WA]	r wy i	I WI I	rwy)	I PR 1	

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[/#38100 v1 - Form D for Inital Shares and Series A Shares/OL] DOCSPNW1:38100.1 14326-2 EJW

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$ <u>4,200,000</u>	\$2,700,000
	☑ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
			Aggregate
		Number of Investors	Dollar Amount of Purchases
	Accredited Investors	3	\$2,700,000
	Non-accredited Investors	-0-	¢
1	·		\$
	Total (for filings under Rule 504 only)		P
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Turnet	Dellas Assessed
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		¢
			Φ
	Total		a
•	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	····	\$ ·
	Printing and Engraving Costs		\$
	Legal Fees		\$70,000
	Accounting Fees		\$
	Engineering Pees	-	\$
			Ф
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) Blue sky		\$ <u>150</u>
	Total		\$ 70.150

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING P	RICE, NUMBER OF INVESTOR	S, EXPENSES AN	D USE OF PRO	CEEDS	
	b. Enter the difference between the a Question 1 and total expenses furnished in "adjusted gross proceeds to the issuer."	ne		\$ <u>2,629,850</u>		
5.	Indicate below the amount of the adjusted for each of the purposes shown. If the ar and check the box to the left of the estimadjusted gross proceeds to the issuer set for	te		4.		
			Payments to On Directors, Affiliate	&	Payments to Others	
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation	of machinery and equipment		\$		\$
	Construction or leasing of plant buildings a			\$		\$.
	Acquisition of other businesses (including offering that may be used in exchange for the	is		_	,	
	pursuant to a merger)		·-	\$	_ 🛘	\$
	Repayment of indebtedness			\$	X	\$ <u>1,000,000</u>
	Working capital			\$	_ 🗵	\$ <u>1,629,850</u>
	Other (specify):			\$	🗆	\$
						
				\$	_ 🔲	\$
	Column Totals			\$	_ 🗵	\$ <u>2,629,850</u>
	Total Payments Listed (column totals added	l)		×	\$ <u>2,629,850</u>	
			•		, •	
		D. FEDERAL SIGN	NATURE			
COBS	issuer has duly caused this notice to be signed be stitutes an undertaking by the issuer to furnish to er to any non-accredited investor pursuant to pa	the U.S. Securities and Exchange Co				
Issu	er (Print or Type)	Signature		Date		
Ave	enir Systems, Inc.			Dec.	23 ,2	2003
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)		<u> </u>		
Dennis Harward President and Secretary						
		ATTENTIO	'n			
	Intentional misstatements or			violations. (Se	ee 18 U.S.C.	1001.)